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ABSTRACT

Currently researchers are reexamining the validity of viewing alcoholics outside of their most important social unit: the family. However, a review of the current research shows little directly addressing how communication patterns influence and possibly sustain alcoholic behavior within the family setting. One study suggests that alcoholism and treatment are more social than psychological considerations, and treatment should focus on positive interaction within the family structure. A wife's participation in treatment was found to improve the chances of her husband's abstinence, but there has been no study to determine if the nonalcoholic husband with an alcholic wife manifests the same characteristics as a nonalcoholic wife. One study observed that alcoholism provides a channel for venting emotions when other communication has broken down. If alcoholism is not caused by poor communication, it results in communication problems. While therapists have examined communication behavior from a pragmatic viewpoint while counseling alcoholic families, little research has been done with communication theory as a basis of analysis. A combination of communication research with studies on the alcoholic family appears to be a promising step toward understanding the problem. (HTH)

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THE ALCOHOLIC FAMILY: A COMMUNICATION PERSPECTIVE

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THE ALCOHOLIC FAMILY: A COMMUNICATION PERSPECTIVE

Although alcoholism has been studied extensively, little research has been done which identifies how communication patterns influence and possibly sustain alcoholic behavior within the family setting. Communication is nearly always mentioned in passing in articles on family interaction, but it is never focused on directly. Such a focus would perhaps produce some interesting experimental and theoretical constructs which are currently lacking in the study of the alcoholic family. Examination of the literature on the alcoholic family suggests that communication theory, with its present emphasis on a systems approach, would be a relevant and workable tool for studying the processes, patterns and interactions which occur in the family system afflicted with alcoholism.

Meeks and Kelly (1970) noted that in response to the treatment of one family member, other members tried to sabotage or become a part of the treatment as if they had a stake in the alcoholic's illness. Additionally other family members started to have problems when the alcoholic improved as if sickness were essential to the family's functioning. Findings such as these led to an increased awareness of a systems approach. Prior to 1970 little research had been done in regard to the alcoholic family, instead the focus was on the alcoholic or on individual personality traits. Currently researchers are re-examining the validity of viewing the alcoholic outside of his most important social unit, the family.

The organizations Alcoholics Anonymous, Al Anon, and Al Teen have been aware of the consequences alcoholism has on all family members. Their common sense approach to alcoholism identifies family dysfunctioning as a major and inevitable problem.

> Alcoholism is a family illness, a family disorder, and never an illness in one individual. It is not an "It" in a person but a reaction of persons. One person drinks in a pathological fashion with disruptive consequences, others react to the drinker, and the drinker responds and drinks again. This sets up a downward spiral of drinking, reaction, response and drinking again, whichfor lack of a better term we call alcoholism (Kellermann,1976).

Instead of studying family interaction, previous research looked at the alcoholic man and his spouse from the standpoint of aberrant behavior. (Nearly all of the earlier studies focused on the male alcoholic.) Early studies suggested that due to their own personality problems wives were attracted to, created and maintained the alcoholic behavior of their spouses. Later studies (Wright & Scott,1978) (Dinabury,Glick & Feigenbaum,1977) have concluded that although many wives may behave dysfunctionally when the alcoholic is actively drinking, they have normal personalities when their husbands abstain.

With this background information in mind the logical progression is to present day research on family interaction patterns. Rather than isolating behaviors,Janzen(1977). Wright & Scott (1978) and Meeks & Kelly (1970), have suggested taking a systems approach. Their research,along with others in their field, attempts to explore patterns of

of interaction(which might justifiably be called communication patterns). This paper suggests that the two terms are at times synonymous in the literature. Whether identified as a crucial element or not, communication is extremely important to the maintainence of any family system. Researchers seem to assume that communication is bad or inadequate but they seldom focus on communication patterns as being instrumental to the problem. This paper attempts to review current literature in light of communication theory and a systems approach. The concerns which are voiced in these articles appear to coincide with many of the issues being studied by communicologists today.

Review of the Literature

Meeks and Kelly (1970) maintain that the family is not only a social unit , but a psychological one as well. Emotional balance is necessary, and is subject to internal forces such as illness or death, as well as, external forces such as economics or political influences. There are four basic principles governing family equilibrium: 1) all members are assigned and assume roles; 2)all families have a set of rules that govern the roles members take and the way they relate to each other; 3) any attempt to shift these rules and roles may evoke resistance to the status quo; and 4) no matter how pathological patterns of functioning may appear to the outside observer, the established equilibrium is that family's attempt to minimize the threat of disruption and pain(Steinhauer, 1967).

In conclusion, Meeks and Kelly (1970) suggest that alcoholism and alcohol treatment are social considerations even more than they are psychological considerations. Treatment therefore should be centered around restoration of positive interaction, communication, self-discovery and awareness of roles within the family structure.

Wright and Scott(1978) found that a wife's participation in treatment improved the chances of her husband's abstinance. They feel that the spouse of an alcoholic is a "normal person" whose personality may have changed due to stress. They conclude that an alcoholic's illness is a family illness. Therefore, treating a spouse is in fact a way of treating the alcoholic. Their work reinforces a systems approach to the therapeutic setting.

In a review of literature from 1953-1972 Dina burg, Glick and Feigenbaum(1977) concluded that the typical alcohol family is described as consisting of an alcoholic husband and a wife who is either punitive, controlling, rescuing, vacillating or long suffering. They note that most research has been conducted on the alcoholic husband and the non-alcoholic wife. It would be interesting to study the reverse situation and see if the non-alcoholic husband manifested these same characteristics. If this were the case, researchers might actually be uncovering responses to the alcoholic situation rather than personality traits.

Research dealing with the family as a dynamic system is quite limited but according to Dinaburg et al. it can be seen as having two possible outcomes: 1) Stress within the system may cause excessive drinking, or 2) drinking may be an integral part of the family system by creating role differentiation or power distribution.

Steiner(1971) examines alcoholism through transactional analysis and depicts the alcoholic game as an outgrowth of needs within the family system. The spouse roles may be identified as rescuer, persecutor or patsy. Whatever the assumed role the important consideration is that these roles are derived within the marital dyad and seem to enable its functioning.

Of vital interest to this paper is the observation that "alcoholism serves as a significant communication channel" (Dinaburg et al.,1977) since in some families free exchange of information about feelings is minimal. The alcoholic pattern provides an acceptable channel for venting emotions and perhaps for avoiding other issues. Often the marital partners may maintain that their relationship would be totally happy if it weren't for the drinking problem. Again the status quo may be maintained to avoid confronting other problems in the relationship. Communication may have disintegrated to the point that the partners are afraid of giving up the alcohol problem

for fear that only a void will remain.

Janzen (1977) discusses two approaches to the relationship between the alcoholic and his family. The first approach is the traditional theory which suggests that personality needs cause the problematic behavior of the alcoholic. The second approach, which reflects Janzen's thinking, supports the systems approach.

> Since in this view events in one part of the family affect the other parts, all members attempt to maintain an equilibrium so that they and the system are not upset. This is done through members taking certain roles and engaging in certain behaviors and communications,(emphasis mine) all of which serve to define expectations and to limit and control the behavior of others(Janzen,1977,p.127).

Cause and effect are difficult,if impossible,to determine, and a more constructive approach according to Janzen would be to look at the interactive effect. This interactive effect in the alcoholic family produces " an increasingly negative, destructive cycle of events in which the question of first cause becomes irrelevant"(Janzen,1977,p.127).

Jacob,Favorini, Meisel and Anderson(1978) reviewed available literature on personality characteristics, children and spouses of alcoholics and family interactions. Transactions, processes and patterns of interaction have been the focus of recent research according to these authors, but unfortunately they do not cite sources. These approaches would be highly applicable to communication theory.

They concluded that the literature was plagued with problems in both methodology and experimental design.

> Another general conclusion to be drawn from this review is that limited ideas about interpersonal relationships in general and psychopathology and alcoholism in particular, have restricted the type of theoretical concepts and experimental strategies used to study relationships between alcoholism and family interaction (Jacob et al.,1978,p.1238).

Certainly the communication field could provide some theoretical bases for research in the interpersonal area.

Kellermann (1976) states that alcoholism cannot appear in a person apart from others, get worse without the help of others, or continue in isolation from other people. This statement, statements dealing with interaction, emphasis on cycles, roles and rules all contribute to the notion that communication research could play a viable and vital role in research on the alcoholic family.

The Applicability of Communication

There are precedents for communication research in the therapeutic family setting including Watzlawick,Beavin and Jackson (1967), Laing,Phillipson and Lee (1966) Berne (1964), and Wilmot (1975). Watzlawick et al. have shown the usefulness of a systems approach to understanding the dynamics of interpersonal relationships. Laing,Phillipson and Lee echo this same approach when they write:

> The failure to see the behavior of one person as a function of the behavior of the other has led to some extraordinary perceptual and conceptual aberations that are still with us.

This interpersonal influence is commonly recognized and referred to in most of the literature on alcoholism reviewed here.

However it is not labeled as "interpersonal influence" since this is primarily a communication concept. Berne (1976) examines alcoholic behavior through transactional analysis. Transactional analysis is often studied in the interpersonal literature of the communication field although its roots are certainly in psychotherapy. Berne identifies the game "alcoholic" which like all games requires other participants. The spouse may play the supporting roles of rescuer, persecutor or patsy. The alcoholic pattern which has been described in the previous review of literature is very comparable to the communication concept of regressive spirals (Wilmot,1975). Regressive spirals occur when one person's negative behavior causes a response which in turn is negative. A spiral of increasingly negative and hostile communication results.

The nature of the illness of alcoholism is such that even if its roots are not lodged in poor communication (biochemical and psychological theories predominate), it results in serious communication problems which seem to reinforce the illness. Kellermann(1976) refers to alcoholism as "a downward spiral of a merry-go-round of blame and denial".

Summary

This paper suggests that the alcoholic family system should be studied from a communication perspective. Although there is a great deal of debate concerning the origins of alcoholism, the research tends to support the notion that at the onset of alcoholism patterns are apparent which tend

to sustain alcoholic behavior. Certainly therapists have examined communication behavior from a pragmatic point of view while counseling alcoholic families, but little research has been done which utilizes communication theory as a basis of analysis. Jacob et al.(1978) state that recent studies have explored communication patterns characterizing alcoholic-spouse interchanges, but they neglect to cite these studies. In reviewing available literature we were unable to find any studies which directly addressed communication concerns.

The systems approach which has been acknowledged as the new frontier in recent family alcoholism research, is an integral part of communication theory. The cross-fertilization of research from the field of communication with studies on the alcoholic family system would appear to be a logical and promising step toward a better understanding of a complex problem.

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